

NAVAL SUPPORT ACTIVITY NORFOLK
TRANSITION ASSISTANCE PROGRAM (TAP)
REQUEST FORM

Department/Location: _____

Rate: _____ **Name:** _____ **EAOS/SEP/FR/RET Date:** _____
 (LAST, FIRST MI)

Reason for TAP (circle one): ADMIN SEP MED SEP SEP AT EAOS FLTRES/RETIRE

TAP Dates Requested: PRIMARY: _____ **TO** _____

SECONDARY: _____ **TO** _____

Are You Married? NO / *YES ***If YES, Will your Spouse be attending TAP?** NO / YES

Note: The above dates are only requested and may be subject to change due to available seats and operational commitments. No-Cost TAD Orders are required for TAP. These must be picked-up at the NSA Admin Office the Friday before attending TAP. TAP is located in Bldg. U-93 (old CPO Club) just inside Gate 3 at Naval Station Norfolk. Muster is @ 0700, so be early as parking is limited. Only Uniform of the Day is authorized. Working Uniforms, Cammies or Civilian Attire are not authorized, and you will be returned to your Command. If you are scheduled to attend and are "UA" from TAP, the Command and your Department will be notified of your absence. Upon completion of TAP, you are required to bring the Command Career Counselor your page 13 stating you have attended the CARIT portion of TAP.

Signature: _____ **Date:** _____

The above signature acknowledges that I have read and understood the above requirements.

To	Yes	No	Signature	Date
Storefront C/C				
Storefront LPO				
Storefront LCPO				
Storefront Officer				
Regional LCPO				
Regional CC toCCC				

Command Career Counselor scheduled member on (date) _____ for TAP Class held:

From: _____ **To:** _____.